

The Arizona Parents Commission on Drug Education and Prevention Grant Program

Request for Grant Application (RFGA)

PC-DSG-16-070116-00

<u>DEADLINE</u>	Applications shall be received on or before 3:00 p.m. (Arizona time) on March 17, 2016 by the Governor's Office of Youth, Faith and Family, 1700 W. Washington, Suite 230, Phoenix, AZ 85007. <u>TELEFAXED, ELECTRONIC OR LATE APPLICATIONS WILL NOT BE ACCEPTED.</u> Submit one (1) original document marked "ORIGINAL" with eight (8) copies and one thumb or flash drive containing the entire application package. The application materials on the thumb or flash drive should appear in MSWord and/or PDF.	
<u>PRE-APPLICATION CONFERENCE</u>	Prospective Applicants are encouraged to attend a conference on February 16, 2016 at 9:00 a.m. (Arizona time) at the State Capitol, Executive Tower, 3 rd Floor Conference Room, 1700 W. Washington, Phoenix, Arizona 85007. The purpose of the conference is to discuss and clarify this Request for Grant Application (RFGA).	
<u>PROCUREMENT GUIDELINES</u>	<p>In accordance with A.R.S. §41-2701, competitive sealed grant applications for the services specified within this document will be received by the Governor's Office of Youth, Faith and Family (GOYFF) at the above specified location until the time and date cited. Grant applications received by the correct time and date will be opened and the name of each Applicant will be publicly read.</p> <p>Grant applications must be submitted in a sealed envelope with the Grant Application Number and the Applicant's name and address clearly indicated on the envelope. Additional instructions for preparing a grant application are included within this document.</p> <p>Applicants are strongly encouraged to carefully read the entire Request for Grant Application document.</p>	
<u>CONTRACT INFORMATION (IF AWARDED)</u>	Grant Title:	The Arizona Parents Commission on Drug Education and Prevention Grant Program
	Contract Type:	Cost Reimbursement Sub-Grant
	Contract Term:	If awarded, the term of the Contract shall commence on July 1, 2016 and shall remain in effect until June 30, 2017, unless terminated, canceled or extended, as otherwise provided herein.
<u>CONTACT INFORMATION</u>	Sarah Bean Procurement Manager Governor's Accounting Office Fax: (602) 542-1329 Email: sbean@az.gov	
<u>AMENDMENTS</u>	It is the sole responsibility of Applicants to check the Governor's website for any changes to this RFGA, which may be made at any time in the sole discretion of the Governor's Office of Youth, Faith and Family, http://substanceabuse.az.gov/substance-abuse/grants	

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Douglas A. Ducey
Governor

State of Arizona
Governor's Office of Youth, Faith and Family

Debbie Moak
Director

OFFER AND ACCEPTANCE FORM (SPO FORM 203)

TO THE GOVERNOR'S OFFICE OF YOUTH, FAITH AND FAMILY:

The Undersigned hereby agrees, if awarded a grant, to all terms, conditions, requirements and amendments in the Request for Grant Application (RFGA) solicitation and any written exceptions, as accepted by the Governor's Office of Youth, Faith and Family, in the Application.

Arizona Transaction (Sales) Privilege Tax License No.:

Name of Point of Contact Concerning this Application:

Name: _____

Federal Employer Identification No.:

Phone: _____ Fax: _____

E-Mail: _____

CERTIFICATION

By signature in this Offer section, the Applicant certifies:

1. The submission of the Application did not involve collusion or other anti-competitive practices.
2. The Applicant shall not discriminate against any employee or applicant for employment in violation of Federal Executive Order 11246, State Executive Order 2009-9 or A.R.S. §§ 41-1461 through 1465.
3. The Applicant has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted offer. Failure to provide a valid signature affirming the stipulations required by this clause shall result in rejection of the offer. Signing the offer with a false statement shall void the offer, any resulting Contract and may be subject to legal remedies provided by law.

Name of Applicant Organization

Signature of Person Authorized to Sign Offer

Address

Printed Name

City

State

Zip

Title

ACCEPTANCE OF APPLICATION

The Application is hereby accepted.

The Applicant is now bound to perform as stated in the attached grant Application, and based upon the RFGA Solicitation, including all terms, conditions, requirements, amendments, etc., and the Applicant's grant Application as accepted by the State.

This grant shall henceforth be referred to as Grant No. _____.

The effective date of the Contract is _____.

The Applicant has been cautioned not to commence any billable work or to provide any material or service under this Contract until Applicant receives an award notice.

State of Arizona

Awarded this _____ day of _____ 20____

Sarah Bean, Procurement Manager

I BACKGROUND INFORMATION

a) What is Governor's Office of Youth, Faith and Family?

The Governor's Office of Youth, Faith and Family (GOYFF) believes that every child has the potential to become a healthy, productive and educated member of society. Additionally, the office supports the Governor's vision of strong, healthy and connected families and communities. The Governor's Office of Youth, Faith and Family provides direct programming, grants and resources, as well as staff expertise to improve the lives of both youth and families. Experienced staff professionals work directly with funded partners and communities to leverage assets to improve the lives of all of Arizona's youth and families, therefore creating a great state to raise a family.

The Governor's Office of Youth, Faith and Family serves as a catalyst for community systems improvement. The Governor's Office of Youth, Faith and Family commissions and councils procure, advise, and monitor initiatives and grant programs. The Governor's Office of Youth, Faith and Family convenes numerous councils, commissions and workgroups including: the Arizona Parents Commission on Drug Education and Prevention, the Arizona Substance Abuse Partnership, the Arizona Juvenile Justice Commission, the Commission to Prevent Violence Against Women, Arizona's Human Trafficking Council, the Council on Child safety and Family Empowerment, the Governor's Commission on Service and Volunteerism and the Governor's Youth Commission. Each commission, council and workgroup has been seated with individuals selected to include diversity, expertise, professionals, geographic areas and interests. Together, all staff, groups, individuals, grants and funded partners work together collaboratively to improve the lives of youth and families in Arizona. It is with great pride that The Governor's Office of Youth, Faith and Family works to execute Governor Ducey's vision of opportunity for all.

b) What is the Arizona Parents Commission on Drug Education and Prevention Grant Program?

The Arizona Parents Commission on Drug Education and Prevention, also known as the Parents Commission, was created by voter initiative in 1996. The Parents Commission's mandate is to increase and enhance parental involvement, and increase education about the serious risks and public health problems caused by the abuse of alcohol and controlled substances.

The commissioners are appointed by the Governor and consist of five parents of children currently enrolled in Arizona schools and one representative each from the education, probation, treatment and prevention, and law enforcement professions.

In making such grants and contracts, the Governor's Office of Youth, Faith and Family shall only fund programs that enhance and increase parental involvement and have a focus on Substance Abuse Prevention for one or numerous substances.

The Parents Commission works jointly with the Governor's Office of Youth, Faith and Family which performs the administrative and professional services for the Commission.

II FUNDING INFORMATION

The Arizona Parents Commission on Drug Education and Prevention receives fifty percent of the monies deposited in the Drug Treatment and Education Fund to provide funding for programs that will increase and enhance parental involvement and will increase education about the serious risks and public health problems caused by the abuse of alcohol and controlled substances. The Drug Treatment and Education Fund, established by A.R.S. §13-901.02, receives seven percent of tax

revenue collected on spirituous liquors and eighteen percent of tax revenue collected on vinous and malt liquor.

a) Who is Eligible to Apply for this Funding Opportunity?

- Arizona School Districts and Institutions of Higher Education
- Arizona Non-profit 501(c)(3) Organizations
- Local, county or state government entities in Arizona
- Arizona Tribal Nations, Tribal Coalitions and Tribal communities
- Any partnership of the above listed organizations (an Arizona fiscal agent must be designated)

b) What is the Total Amount of Available Funds?

This is a twelve (12) month Contract that may be renewable for up to two (2) additional twelve-month periods, contingent upon the availability of funds and in the sole discretion of the Governor’s Office of Youth, Faith and Family. Consideration for renewal will also be based on compliance with terms and conditions, programmatic and financial performance, results of program and fiscal monitoring and a program sustainability plan, and the submission of a renewal application. It is anticipated (but not guaranteed) that total funds available will be approximately \$4,000,000 for the first initial Contract year. The number of awards will depend on the number and quality of applications received. It is anticipated that qualifying Applicants will be awarded between \$100,000 and \$200,000 for the first term.

The funds awarded under this Request for Grant Application (RFGA) are State of Arizona funds. The State of Arizona Accounting Manual will be used as the ultimate authority for determining allowable costs, which may be referenced at <http://www.gao.az.gov/publications/SAAM/default.asp>. However, where no guidance is available in the State of Arizona Accounting Manual, Applicants shall be subject to the applicable Code of Federal Regulations and OMB Circulars.

c) What Will This Request for Grant Application Fund?

The Arizona Parents Commission on Drug Education and Prevention Grant Program will fund evidence-based and evidence informed programs that increase and/or enhance parental involvement, and increase education about the serious risks and public health problems caused by the abuse of alcohol, tobacco, and other drugs. Programs are encouraged to collaborate and coordinate with various community partners to enhance programs, services, engagement, and participation. Programs will be considered in the following categories*:

- | | |
|--------------------------|--------------------------------|
| • Rural | 40% of total funding available |
| • Tribal | 15% of total funding available |
| • Urban/County/Statewide | 45% of total funding available |

*The allocation may be changed among the three categories in order to ensure the best overall mix of programs that will most appropriately serve the State of Arizona. The final distribution will be based upon the number and quality of applications received as determined by the Governor’s Office of Youth, Faith and Family and in the sole discretion of the Governor’s Office of Youth, Faith and Family.

Applicants may not apply under more than one category. Each organization applying for the Parents Commission Grant can only submit one application.

Rural – Rural is defined as a target area with a population of 75,000 or fewer.

Tribal – Eligible Applicants include Federally recognized Indian Tribes; consortia of Indian Tribes; incorporated non-Federally recognized Tribes; incorporated non-profit multi-purpose community-based

Indian organizations; urban Indian centers; National or regional incorporated non-profit Native American organizations with Native American community-specific objectives.

Urban/County/Statewide – Urban is defined as a target area with a population of more than 75,000. County is defined as a target area of a consortium of municipalities and/or a countywide target area with a population of more than 75,000. Statewide is defined as a target area with a population of more than 75,000 in more than one county.

III Special Instructions to Applicants

Authority

In accordance with A.R.S. §41-2701, competitive sealed grant applications to support the Arizona Parents Commission on Drug Education and Prevention Grant Program initiatives will be received by the Governor's Office of Youth, Faith and Family. Contracts will be issued for use by the Governor's Office of Youth, Faith and Family.

Application Opening

All grant applications must be in the actual physical possession of the Governor's Office of Youth, Faith and Family, in Suite 230, on or prior to 3:00 p.m. (Arizona local time) on March 17, 2016, for consideration at the bid opening. Applications received by the due date and time will be opened and the name of each Applicant will be publicly read. Applications will not be subject to public inspection until after Contract award.

Applicants are cautioned not to rely on next day U.S. Postal mail services. Mail sent to the Governor's Office of Youth, Faith and Family is filtered through the Arizona Department of Administration.

The Governor's Office of Youth, Faith and Family is not responsible for packages delivered to locations other than Suite 230. All applications will be date stamped using the time clock in Suite 230 only.

Telefaxed, electronic or late grant applications will not be accepted.

Grant applications must be submitted in a SEALED envelope/package/container with the grant application number and the Applicant's name and address clearly indicated on the package.

Duty to Examine

It is the responsibility of each Applicant to examine the entire solicitation, seek clarification in writing (inquiries), and examine its application for accuracy before submitting the application. Lack of care in preparing an application shall not be grounds for modifying or withdrawing the application after the application due date and time.

Applicants will be required to submit the documents and exhibits as outlined in this RFGA. Follow the instructions and guidelines found in each of the document sections.

Responses should be typed, single-spaced with one-inch margins or wider with a twelve-point font used.

Applications should be single sided, NOT duplexed.

Number all pages and include a table of contents that follows the checklist presented on page 20-21. The table of contents shall reference page numbers. Page numbers may be labeled or handwritten, especially on forms not contained in the exhibit section (e.g. IRS 501(c) (3) tax-exempt letter, solicitation amendments, etc.).

Refer to the Checklist on page 20-21 to verify inclusion of all required documentation and format the application package to assemble application materials following the listing in the checklist.

Additional materials beyond the grant application requirements, such as promotional brochures, should not be added to the application package.

Applications are NOT to be bound in spiral binders or in 3-ring notebooks. Submit applications secured with a binder clip.

The original copy of your application should be clearly marked "ORIGINAL". Submit one (1) original document marked "ORIGINAL" with eight (8) copies and one thumb/flash drive containing the entire application package. Please note, the application on the thumb/flash drive should appear in MSWord 10 or lower and/or PDF format or lower version. Submit only one (1) copy of your financial audit and Form 990 with schedules at the end of the original application package. Photocopies of the financial audit and Form 990 with schedules are not required. The Request for Grant Application Number PC-DSG-16-070116-00 and the organization's name must be clearly marked on the outside of the SEALED package. Open packages will not be accepted.

Inquiries

The Procurement Manager shall be the sole point of contact for all questions regarding this RFGA and the application process in this formal, competitive solicitation process. Direct questions to:

Sarah Bean
Procurement Manager
Governor's Accounting Office
E-mail: sbean@az.gov
Fax: (602) 542-1329

Applicants **shall not contact** the employees of the Governor's Office of Youth, Faith and Family or members of the Arizona Parents Commission on Drug Education and Prevention regarding this procurement activity while the formal solicitation process is underway.

Submission of Inquiries

The Procurement Manager, as the contact for inquiries except at the Pre-Application Conference, requires that an inquiry be submitted in writing. Any inquiry related to a solicitation shall refer to the appropriate solicitation number, page and paragraph number. Applicants are prohibited from contacting any State of Arizona employee other than the Procurement Manager concerning the procurement while the solicitation and evaluation are in process.

Timeliness

Any inquiry or exception to the solicitation shall be submitted as soon as possible and should be submitted at least seven days before the solicitation due date and time for review and determination by the State of Arizona. Failure to do so may result in the inquiry not being considered for a Solicitation Amendment.

No Right to Rely on Verbal or Electronic Mail Responses

An Applicant shall not rely on verbal or electronic mail responses to inquiries. A verbal or electronic mail reply to an inquiry does not constitute a modification of the solicitation.

Pre-Application Conference

Attend, if necessary, the Pre-Application Conference on **February 16, 2016, at 9:00 a.m.** (Arizona time), at the State Capitol, Executive Tower, 3rd Floor Conference Room, 1700 W. Washington, Phoenix, Arizona 85007. Applicants should raise any questions about the solicitation or procurement at that time. An Applicant may not rely on any verbal responses to questions at the conference. Material

issues raised at the conference that result in changes to the solicitation shall be answered solely through a written solicitation amendment. Attendance at the Pre-Application Conference is encouraged, but not mandatory.

Persons with Disabilities

Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting the Procurement Manager. Requests shall be made as early as possible to allow time to arrange the accommodation.

Application Preparation

Forms: No Facsimile, Telegraphic or Electronic Mail Applications

The application is presented in both MS Word and PDF format. Applicants are responsible for clearly identifying any and all changes or modifications to any solicitation documents upon posting to the GOYFF website at <http://substanceabuse.az.gov/substance-abuse/grants>. Any unidentified alteration or modification to any Solicitation, attachments, exhibits, forms, charts or illustrations contained herein shall be null and void. A facsimile, telegraphic, mailgram or electronic mail application shall be rejected if submitted in response to a request for grant application.

Offer and Acceptance and Evidence of Intent to be Bound

The Offer and Acceptance form within the solicitation shall be submitted with the application and shall include a signature by a person authorized to sign the application. The signature shall signify the Applicant's intent to be bound by the application and the terms of the solicitation and that the information provided is true, accurate and complete. Failure to submit verifiable evidence of an intent to be bound, such as a signature, shall result in rejection of the application. Failure to return an Offer and Acceptance form may result in rejection of the Application.

Exceptions to Terms and Conditions

All exceptions included with the application shall be submitted in a clearly identified separate section of the application in which the Applicant clearly identifies the specific paragraphs of the solicitation where the exceptions occur. Any exceptions not included in such a section shall be without force and effect in any resulting Contract unless such exception is specifically accepted by the Procurement Manager in a written statement. The Applicant's preprinted or standard terms will not be considered by the State as a part of any resulting Contract, if any.

All exceptions that are contained in the application may negatively impact an Applicant's susceptibility for award. An application that takes exception to any material requirement of the solicitation may be rejected.

Subcontracts

The Applicant shall clearly list any proposed subcontractors and the subcontractor's proposed responsibilities in the application.

Costs of Application Preparation

The State of Arizona will not reimburse any Applicant the cost of responding to a solicitation.

Submission of Application

Sealed Package. Each application shall be submitted to the submittal location identified in this solicitation. Applications shall be submitted in a sealed package. The package should be clearly identified with the name of the Applicant and solicitation number. The State may open packages to identify contents if the envelope or container is not clearly identified.

Application Submission, Due Date and Time

Applications shall be received before the due date and time stated in the solicitation. Applications submitted after the due date and time shall be rejected.

Solicitation Amendments

The Solicitation may be amended at any time before the application due date in the sole discretion of the GOYFF. The Solicitation shall only be modified by a solicitation amendment.

Each solicitation amendment shall be signed with an original signature by the person signing the application, and shall be submitted no later than the application due date and time in a sealed package. Failure to return a signed solicitation amendment may result in rejection of the application. It is the sole responsibility of Applicants to check the Governor's Office of Youth, Faith and Family' website for any changes to this RFGA at <http://substanceabuse.az.gov/substance-abuse/grants>.

Application Amendment

An application may not be amended after the Application due date and time except as otherwise provided under applicable law.

Confidential Information

If an Applicant believes that any portion of an Application, protest, or correspondence contains a trade secret or other proprietary information, the Applicant shall clearly designate the trade secret and other proprietary information, using the term "confidential." An Applicant shall provide a statement detailing the reasons why the information should not be disclosed including the specific harm or prejudice that may arise upon disclosure. The Procurement Officer shall review all requests for confidentiality and provide a written determination. Until a written determination is made, a Procurement Officer shall not disclose information designated as confidential except to those individuals deemed to have a legitimate State of Arizona interest. In the event the Procurement Officer denies the request for confidentiality, the Applicant may appeal the determination to the Director of the Arizona Department of Administration within the time specified in the written determination. Contract terms and conditions, pricing, and information generally available to the public are not considered confidential information.

Public Record

All applications submitted and opened are public records and must be retained by the State for six years. Applications shall be open to public inspection after Contract award, except for any portion of such applications that is deemed to be confidential by the State when under the State's control.

Non-collusion, Employment, and Services

By signing the Offer and Acceptance Form or other official Contract form, the Applicant certifies that:

- The Applicant did not engage in collusion or other anti-competitive practices in connection with the preparation or submission of its application, and
- The Applicant does not discriminate against any employee or Applicant for employment or person to whom it provides services because of race, age, color, religion, sex, national origin, or disability, and that it complies with applicable federal, state and local laws and executive orders regarding employment.

Late Applications

An application submitted after the exact application due date and time shall be disqualified and rejected.

Disqualifications

An Applicant (including each of its principals, members, agents, board members, and officers) who is currently debarred, suspended or otherwise lawfully prohibited from any public procurement activity shall have its application rejected.

Waiver and Rejection Rights

Notwithstanding any other provision of the solicitation, the State of Arizona reserves the right to:

- A. Waive any informality;
- B. Reject any and all applications or portions thereof;
- C. Amend the solicitation prior to the Application due date; and/or
- D. Cancel the solicitation.

Award

The State of Arizona reserves the right to make multiple awards or to award a Contract by individual line items or alternatives, by group of line items or alternatives, or to make an aggregate award, or regional awards, whichever is most advantageous to the State in its sole discretion.

In the event that the evaluation committee does not feel an application meets the State's needs adequately, the GOYFF reserves the right to reduce the total amount of funding available for award in its sole discretion.

In the event that the available source of grant funds for distribution should incrementally decrease or increase, the Governor's Office of Youth, Faith and Family reserves the option to adjust the budgets of the Applicants individually or collectively, based upon score rankings. In the event that the volume of applications received exceeds the available amount of funding, the Governor's Office of Youth, Faith and Family reserves the option to adjust the budgets of the Applicants individually or collectively, based upon score rankings. Based upon evaluation results, the Governor's Office of Youth, Faith and Family reserves the right to award Contracts for less than the proposed amount based upon past programmatic or financial performance with previous grants, unallowable costs, applications that have exceeded the requested funding range limits in the solicitation, or for other reasons in its sole discretion. In these circumstances, revised budget documents will be required.

Contract Inception

An application does not constitute a Contract nor does it confer any rights on the Applicant to the award of a Contract. A Contract is not created until the application is accepted in writing by the Procurement Manager's signature on the Offer and Acceptance Form. The intent to award shall not constitute acceptance of the application. A separate Contract form will be issued and will be effective upon execution of the document.

Effective Date

The effective date of a Contract, if any, shall be the date that the Procurement Manager signs the Offer and Acceptance form or other official Contract form, unless another date is specifically stated in the Contract.

Application Records

Keep a copy of this solicitation and the submitted grant application. If awarded, the Grantee shall be bound to the services listed by the grant application and based upon the solicitation, including all terms, conditions, specifications, amendments, clarification responses, etc.

Solicitation Results

All Applicants will be notified in writing, whether or not selected for award, prior to the anticipated Contract start date. Pursuant to A.R.S. §41-2702 (E), all applications shall not be open for public inspection until after grants are awarded. A.R.S. §41-2702 (G) also states the evaluator assessments shall be made available for public inspection no later than thirty (30) days after a formal award is made.

Mandatory Grantee Orientation

Each successful Applicant who is selected for award will be required to attend a mandatory Grantee Orientation. The time and location for this meeting will be detailed in an award letter. A fiscal representative AND a program representative will be required to attend.

IV EVALUATION CRITERIA

A review committee will evaluate applications and select those applications deemed susceptible for an award, in accordance with A.R.S. §41-2702(f), based upon complete detailed narratives and exhibits on the following criteria.

Evaluation Criteria

Needs/Resources	100 points
Goals, Outcome Objectives and Performance Measures	200 points
Strategies/Approaches and Implementation Plan	200 points
Organizational Capacity	200 points
Resources and Budget	200 points
Sustainability	100 points

Up to 100 additional **priority points** will be given to Applicants that clearly demonstrate the following in their Strategies/Approaches and Implementation Plan:

- Engagement of youth and parents together/family drug prevention planning **(25 points)**
- Implementation of youth engagement activities (active engagement of youth in coalition activities, youth leadership components, etc.) (25 points)
- Inclusion of one or more strategies from Arizona's Prescription Drug Misuse and Abuse Initiative. The Arizona Prescription Drug Misuse and Abuse Initiative Toolkit provides the roadmap to move communities beyond that initial awareness concerning prescription drug misuse and abuse into action and then to outcomes. For more information on The AZ RX Drug Misuse and Abuse Initiative Toolkit visit Prescription Drug Core Group subcommittee page at <http://substanceabuse.az.gov/substance-abuse/commissions> **(25 points)**
- Utilization of peer to peer program components as an additional service to further engage youth and adults attending parenting programs **(25 points)**

Note 1: In the event that the evaluation committee does not feel an application meets the State's needs adequately, the GOYFF reserves the right to reduce the funding available for award.

Note 2: Applications should not include an evaluation component due to the Governor's Office of Youth, Faith and Family securing a standard evaluator. When awarded, the evaluator will conduct a cross-site evaluation of your program.

V APPLICATION PROGRAM NARRATIVE REQUIREMENTS

1. Executive Summary (one (1) page maximum)

Provide a one-page narrative overview of the proposed program that includes a brief summary of the program goals, objectives, methods to be used and collaboration efforts. Provide the following:

- A. State the name of the proposed program, specific target population, strategy/approach, outcomes, cost per participant-direct cost and indirect cost.
- B. Clearly indicate whether the organization is in the rural, tribal or urban/county/statewide category. Select the category that is most appropriate for your program. Each organization applying to the Arizona Parents Commission on Drug Education and Prevention Grant Program shall apply for **ONLY ONE** category. Each organization applying for the Parents Commission Grant shall only submit one application.

2. Needs/Resources (three (3) pages maximum, not including exhibits)

This component creates a foundation for the application by focusing on: problem identification; the targeted individuals or groups to be reached; other individuals or groups who will play a role in the development or implementation of the program; the relevant risk and protective factors/assets; the gathering and analysis of data that will establish the needs to support the identified problem; and the identification of other resources currently directed toward the identified problem.

Provide a narrative response to each of the following:

- A. State the problem or issue addressed in this application.
- B. Based on the stated problem, what group(s) of people or communities will the application be targeting, i.e. your target population. Discuss how many people do you plan to deliver this program to including the number of adults to be served directly (unduplicated), the number of youth to be served directly (unduplicated), and the target number of families to be served. Define what constitutes a family. Also, project the number of adults to be impacted indirectly and the number of youth to be impacted indirectly. Each successful Applicant who receives an award will be required to report on the following outputs:
 - Number of adults directly served
 - Number of adults indirectly impacted
 - Number of youth directly served
 - Number of youth indirectly impacted
 - Number of families directly served
 - Number of public education and awareness events
 - Number of materials handed out at public education and awareness events
- C. Identify the external team. Who will you work with in the community, how will they impact your program? Draft letters of support or draft Memorandum of Understanding (MOU), which define the formal agreements including individual or agency involvement and specific roles and responsibilities, must be included with the application. Examples of collaborative partnerships could include the following:
 - The program will utilize a subcontractor to provide a service(s) in which there will be an exchange of grant funds to pay for that service.
 - Programs identify a partner where grant funds will not exchange hands, but in order for the program to be viable, a service will be provided or there is an agreement to work together.
- D. Identify other individual groups (or key stakeholders) involved in the development and/or implementation of the proposed project.
- E. Identify the risk factors and protective factors that are most relevant to the stated problem and the target population. (See Attachment B: for samples of risk and protective factors.)
- F. Identify the sources of the data, how that data was collected, and how that data relates to and validates the identified risk factor(s), protective factor(s), and problem(s) in the community. Include relevant Arizona Youth Survey (AYS) data from your community (if available) and your county. The AYS is a biennial survey of 8th, 10th, and 12th grade students enrolled in publicly-funded schools in Arizona. The survey contains questions about risk and protective factors, drug use, and delinquency among other topics. The data can be found at http://www.azcjc.gov/cdp_site/AYS.aspx

- G. What resources (federal, state, local) in your community and/or within your organization are currently being directed toward the stated problem? How will the proposed program support those efforts or enhance existing prevention programs?
- H. Describe your current efforts of collaboration with local coalitions / other community programs addressing similar problems/issues in the community.
- I. Identify the internal team. Who are the individuals within the Applicant's organization involved in the development and implementation of the program and what are the specific roles of these individuals?

3. Goals, Outcome Objectives and Performance Measures

The following exhibit must be completed: **K**(no additional narrative required)

This component captures the broad statements of intent (goals) and the measurable, time-specific outcomes (objectives) that will address the identified problem/needs. Goals are general and should reflect what changes are desired within your targeted population or community area. Objectives should support the goals and should describe specific changes that will be accomplished within a certain period of time and are able to be measured. It is critical that the goals and objectives are realistic in terms of both time and available resources. Therefore, it may be necessary to develop intermediate or short-term objectives. It is also important that the goals and objectives be stated or otherwise explained in ways that directly link them to the identified problem/needs and the selected risk and protective factors. Process objectives will be addressed in the Implementation Plan Section.

Performance measures are intended to be a useful tool for program managers to define and communicate the need their program will address and the impact the program will have. The measures provide indicators as to whether the program is having the intended effect. *Outputs* are products of a program's activities. Outputs are expected to lead to desired outcomes, but by themselves do not tell anything about the outcomes. *Outcomes* are changes resulting from outputs.

Complete Exhibit K to provide a response to each of the following:

- State the goal(s) and rationale for addressing the identified problem/need and/or risk and protective factors.
- For each goal, identify objectives for each of the following outputs and how they will be measured:
 - Number of adults directly served
 - Number of adults indirectly impacted
 - Number of youth directly served
 - Number of youth indirectly impacted
 - Number of families directly served
 - Number of public education and awareness events
 - Number of materials handed out at public education and awareness events
- For each goal, identify which of the following outcomes will apply to your program implementation*:
 - Parental Stress
 - Family Cohesion
 - Family Connectedness
 - Family Conflict
 - Family Management
 - Family Involvement

- Perception of Risk/Harm of Youth Substance Use
- Parental Attitudes of Youth Substance Use
- Youth Perception of Family Cohesion
- Youth Perception of Family Involvement
- Youth Perception of Risk/Harm of Substance Use
- Youth Perception of Parental Attitudes of Youth Substance Use

***If the Applicant receives an award, all of the above outcomes will be measured in the Parents Commission cross-site evaluation of your program. This will be conducted by the Parents Commission external evaluation team.**

- For each outcome objective:
 - Write an outcome objective that describes what will change in the targeted population/area (e.g. behavior/attitudes, decrease in risk or increase in protective factors, impact on indicators/statistics, etc.).
 - Quantify how much will change (e.g. increase or decrease in numbers, percentages, etc.).
 - Provide a specific date by which you anticipate the change(s) will occur.
- For each outcome objective, identify and define Performance Measures that will be used to measure the effectiveness of the implementation of the selected activity and explain how this data will be collected or what tools will be used (e.g. number of participants attending/completing, participant satisfaction, adequacy of resources, timely completion of activities, etc.).
- Identify how you will assess progress toward achieving your goals and objectives.

4. Strategies/Approaches and Implementation Plan (seven (7) pages maximum)

Strategies/Approaches

This component identifies and describes the intervention chosen to reach the stated goals and objectives. These strategies and approaches can be programs that have already been proven effective in addressing the identified problem/needs, or they can be adaptations or strategies selected from effective programs that are backed up by evidence-based research or evidence-informed research related to the particular problem/need and target population/area being addressed.

The terms “evidence-based” and “evidence-informed” are defined differently in different contexts.¹

Evidence-based practices are approaches to prevention or treatment that are validated by some form of documented scientific evidence. This includes findings established through controlled clinical studies, but other methods of establishing evidence are valid as well. *Evidence-based programs* use a defined curriculum or set of services that, when implemented with fidelity as a whole, has been validated by some form of scientific evidence. Evidence-based practices and programs may be described as “supported” or “well-supported”, depending on the strength of the research design.

Evidence-informed practices use the best available research and practice knowledge to guide program design and implementation. This informed practice allows for innovation while incorporating the lessons learned from existing research literature. Ideally, evidence-based and evidence-informed programs and practices should be responsive to families’ cultural backgrounds, community values and individual preferences.

¹ Definition source: Children’s Bureau, U.S. Department of Health and Human Services, Child Welfare Information Gateway, FRIENDS National Resource Center for Community-Based Child Abuse Prevention, and the Center for the Study of Social Policy-Strengthening Families (2011). Strengthening Families and Communities: 2011 Resource Guide, located at www.childwelfare.gov/pubs/guide2011/guide.pdf#page=17.

Research has identified a number of evidence-based and evidence-informed programs and practices that are relevant to the prevention of substance use and abuse. Federal registries, national registries and websites provide more detailed information about particular programs. Applicants are encouraged to evaluate the level of evidence available for any specific program, as well as to consider its appropriateness for specific families and communities. Provide documentation and/or website links that identify your evidence based program.

Priority points will be given to those programs that 1) support engaging youth and parents together and include family drug prevention planning and/or 2) identify an adult and/or youth peer to peer component and/or 3) include and initiate youth engagement activities and/or 4) inclusion of one or more strategies from Arizona's Prescription Drug Misuse and Abuse Initiative.

Provide a narrative response to each of the following:

- A. Describe the strategies/approaches or proven effective program that will be used to meet the goals and objectives.
- B. Explain how the selected strategies/approaches or proven effective program fit with the identified problem/need and will lead to achieving the stated goals and objectives.
- C. Describe the program strategies/approaches connected to the selected risk and protective factors.
- D. If adapting a proven effective program to meet your needs, community norm or differing cultures, explain how the core elements of the original research-based intervention will be maintained.
 - i. Structure (how the program is organized and constructed)
 - ii. Content (the information, skills, and strategies of the program)
 - iii. Delivery (how the program is adapted and implemented)
- E. Explain how the selected strategies/approaches or proven effective program applies to the targeted population and explain how the selected strategies/approaches or proven effective programs are culturally competent/culturally diversified, age appropriate and gender responsive.
- F. To obtain priority points, provide a response to the following questions, as applicable:
 - i. Describe your strategies for engaging youth and adults together in a way that gives families time to practice skill building. Describe any plans to conduct family drug prevention planning.
 - ii. Identify and describe any adult and/or youth peer to peer component to be utilized. These efforts should enhance, rather than replace, your proposed evidence-based or evidence informed program implementation.
 - iii. Identify and describe any youth engagement components to be utilized.
 - iv. Identify and describe the use of one or more strategies from Arizona's Prescription Drug Misuse and Abuse Initiative as a part of your comprehensive program.

5. Implementation Plan

The following exhibit must be completed: **L**

This component focuses on the steps that must be taken to put the program strategies/approaches into action. It should include all the elements that will be required to operationalize the strategies for the duration of the grant. **The implementation plan should be clear, concise, and provide detailed timeframes for the completion of process objectives.**

Implementation Plan Activities

Provide a narrative response to each of the following:

- A. Describe the plan for recruiting and retaining participants/clients.
- B. Describe any anticipated barriers to participation and/or completion and your plans to overcome those barriers.
- C. Describe any training that will be needed for existing and/or new staff. How and when will this training be delivered? Who will deliver the training?

6. **Organizational Capacity (three (3) page maximum, not including attachments)**

The following exhibits must be completed: **F, G, and H.**

Provide a narrative response to the each of the following:

- A. Describe your organization's capacity to implement and administer the proposed program. Provide examples of experience in implementing and administering related programs and the outcomes of those programs. **NOTE: Past performance on any grants from the Governor's Office of Youth, Faith and Family may be taken into consideration in the evaluation of your application.**
- B. Describe staff accountabilities and qualifications - both programmatic and fiscal. List how much time each person will spend on the project. Include a brief description of how grants are fiscally administered in your organization. In addition, attach resumes for key individuals (your fiscal person is a key individual) involved in the project or job descriptions for positions to be filled. Provide an organization chart for the project (Exhibit G for listing staff qualifications).
- C. Provide a description on the communication process between the Applicant and the proposed subcontractor and the requesting agency and identify responsibilities, if applicable (Exhibit H).
- D. What capacity building will be needed to implement strategies/approaches? This may include additional resources, establishing or strengthening relationships with collaborators, increasing staff both programmatic and fiscal, adding data or financial systems, contracting with subcontractors or providers, and necessary equipment.
- E. Include a brief description of how grants are fiscally administered in your organization.
- F. Describe the organization's success in sustaining programs that were developed and or implemented under other grant programs.

7. **Resources and Budget**

The following exhibit must be completed: **B, C, D, E, F and I (no additional narrative required)**

Funding shall be limited to those items specifically listed in the proposed budget and support the scope of work proposed. Total funding may not be modified following award of the Contract. After award, requests for line item modifications that do not change the total program funding, **must be requested and approved in writing**. If approval of the change is granted, written authorization from the Governor's Office of Youth, Faith and Family will be provided.

Consider the following when completing the required budget exhibits:

- List all resources that will be needed to implement and administer the strategies/approaches. These resources may be financial as well as involve curriculum, supplies, space, equipment, etc.
- Each successful Applicant that receives an award will be required to attend a mandatory Grantee Orientation and training on the statewide evaluation data collection process. The time and location for this meeting will be detailed in an award letter. A fiscal representative AND a program representative will be required to attend. Include costs of travel, hotel and per diem to the Phoenix area for two representatives, if needed.
- Each Applicant's program will be evaluated based on the cost-effectiveness of the program.
- List all other sources of funding currently received from Governor's Office of Youth, Faith and Family, other State of Arizona or public agencies, Federal agencies, non-profit organizations and any other sources that contribute and support prevention programs in your organization.

FINANCIAL ASSESSMENT

Attach one copy of the audited financial statements at the end of the completed original application.

If your organization is subject to the requirements of the A-133 Single Audit Act, attach one copy of your organization's most recently completed A-133 Single Audit with the Management Letter, Findings and Questioned Costs to the completed application.

If your organization is not subject to A-133, submit one copy of the most recently completed audit of financial statements, with the Management Letter, Findings and Questioned Costs.

If your organization is not subject to the requirements for an audit, attach the most recent internally prepared financial statements including a Balance Sheet, Income Statement, and Statement of Cash Flows along with a description of the source of the documents.

Minimization of Conference Costs

Incentives and food costs are unallowable, unless the service cannot be conducted without incurring such expenses. If incentives are utilized, explain what value is added to the program as a result of this expense. What is the definitive public purpose for the use of the incentives? State whether or not the use of incentives would be necessary to accomplish the program objectives. State whether or not a similar level of success might be achieved without this expense. Provide justification on how the benefit outweighs the costs. Discuss any history or data that proves the effectiveness of using incentives.

Note: Cash incentives will not be a reimbursable expense under this grant.

Match

There is no match requirement for this program. Should you choose to include match in your proposed budget, those funds or in-kind services will be subject to monitoring by the Governor's Office of Youth, Faith and Family.

Any use of funds from this grant as match towards another grant program must be pre-approved in writing by the Governor's Office of Youth, Faith and Family.

8. **Sustainability (two (2) pages maximum)**

In recognition that sustaining prevention efforts is key to assuring a lasting impact, this section requires details on plans for incorporating sustainability into all primary aspects of prevention efforts. In addition to outlining a plan for sustainability, this particular section identifies methods for incorporating sustainability into strategic planning processes, along with the identification of mechanisms for developing and promoting sustainable programs.

Provide a narrative response to each of the following:

- A. Describe capacity building activities that will ensure that the program is sustained with fidelity beyond this funding.
- B. Describe any anticipated barrier(s) to sustainability and the plan to overcome the barrier(s).
- C. Describe the plan for sustainability that includes activities beyond simply seeking state, federal or local grant funding to replace the current grant funding. The plan should identify strategies and action steps needed to sustain activities that achieve performance indicators and promote positive changes.
 - i. Identify the diverse resource requirements needed to continue key activities after the life of the grant.
 - ii. Outline a plan to ensure that the impact of the program is sustainable beyond the presence of this grant funding. Identify strategies and action steps needed to sustain activities.
 - iii. Describe the mechanisms that are in place or will be developed to ensure the essential components of the program are sustained at the conclusion of the funding period.
 - iv. Identify who will monitor the implementation of the sustainability plan.
 - v. Incorporate sustainability objectives and associated tasks into the implementation plan (Exhibit L).

LIST OF EXHIBITS AND ATTACHMENTS:

- Exhibit A: Checklist
 - Exhibit B: Funds Requested Page
 - Exhibit C: Sample Line Item Budget
 - Exhibit D: Sample Budget Narrative
 - Exhibit E: Disclosure Form of Other Funding Sources
 - Exhibit F: Disclosure Form of Other Funding Sources (Other Prevention Programs)
 - Exhibit G: Staff Overview
 - Exhibit H: Applicant's Proposed Subcontractor(s)
 - Exhibit I: GOYFF Standard Data Collection Form
 - Exhibit J: GOYFF Financial Systems Survey
 - Exhibit K: Goals, Outcome Objectives and Performance Measures
 - Exhibit L: Implementation Plan
-
- Attachment A: Terms and Conditions
 - Attachment B: Indemnification and Insurance Requirements
 - Attachment C: Sample Risk and Protective Factors
 - Attachment D: Sample Certificate of Insurance

EXHIBIT A

Checklist

The Arizona Parents Commission on Drug Education and Prevention Grant Program
RFGA No. PC-DSG-16-070116-00

Name of Organization: _____

Checklist:

Use the following list to make sure your Grant Application for the Arizona Parents Commission on Drug Education and Prevention Grant Program is complete and meets the requirements specified in this request for grant application. Please assemble your application in the order listed below.

- ☐ One (1) original document marked "ORIGINAL" and eight (8) additional copies, with one thumb or flash drive containing the entire application package. The application materials on the thumb or flash drive should appear in MS Word and/or PDF.
- ☐ Completed and signed Offer and Acceptance Form (SPO form 203).
- ☐ Exhibit A – Checklist. Signed and attached.
- ☐ Solicitation Amendment(s). Signed and submitted, if issued.
- ☐ Submit your most recent IRS 501(c) (3) tax-exempt letter, if your organization is a non-profit.
- ☐ Executive Summary.
- ☐ Application Program Narrative.
- ☐ Exhibit B - Funds Requested Page. Completed and attached.
- ☐ Exhibit C - Line Item Budget. Completed and attached.
- ☐ Exhibit D - Budget Narrative. Completed and attached.
- ☐ Exhibit E - Disclosure Form of Other Funding Sources. Completed and attached.
- ☐ Exhibit F - Disclosure Form of Other Funding Sources-Organization Prevention Programs. Completed and attached
- ☐ Exhibit G - Staff Overview. Completed and attached.
- ☐ Resumes and/or job descriptions and Organization Chart attached.
- ☐ Exhibit H – Applicant's Proposed Subcontractor(s). Completed and attached.
- ☐ Exhibit I –GOYFF Standard Data Collection Form. Completed and attached.
- ☐ Exhibit J –GOYFF Financial Systems Survey. Completed and attached.
- ☐ Exhibit K - Goals, Outcome Objectives and Performance Measures. Completed and attached.
- ☐ Exhibit L - Implementation Plan. Completed and attached.
- ☐ Meet one of the three audit report requirements:
 - Each nonprofit corporation that receives in excess of two hundred fifty thousand dollars in state assistance in any fiscal year shall file for each such fiscal year at the corporation's expense with the grantor agency either audited financial statements prepared in accordance with federal single audit regulations or financial

statements prepared in accordance with generally accepted accounting principles and audited by an independent certified public accountant.

- Each nonprofit corporation receiving two hundred fifty thousand dollars or less in state assistance in any fiscal year shall comply with contract requirements concerning financial and compliance audits contained in contract agreements governing such programs.
 - A nonprofit that is not subject to audit requirements shall submit one copy of the most recently prepared financial statements including a Balance Sheet, Income Statement, and Statement of Cash Flows along with a description of the source of the documents.
-
- ☐ All 501(c)(3) organizations and other federally tax-exempt organizations that are required to file the annual reporting return, Form 990, to the Internal Revenue Service must attach a copy of their most recently filed Form 990 and related schedules, directly behind the audit report in the application materials.
 - ☐ Applications should be in twelve point font or larger, single-spaced, with one inch margins or wider and single sided, NOT duplexed.
 - ☐ Page numbers are included on all pages, in sequence and a table of contents is included with page numbers referenced. Page numbers may be handwritten or labeled.
 - ☐ The original application set with documents requiring signatures must have **ORIGINAL** signatures.
 - ☐ Do **NOT** bind your application in spiral binders or in 3-ring notebooks. Please submit your applications secured by a binder clip.
 - ☐ When submitting your application, ensure your organization name and the Request for Grant Application Number PC-DSG-16-070116-00 is **CLEARLY** marked on the outside of the **SEALED** envelope/package.
 - ☐ All applications are date stamped by the time clock in the Governor's Office of Youth, Faith and Family, 1700 W. Washington, Suite 230, Phoenix, AZ 85007.
 - It is the responsibility of each Applicant to ensure their application is delivered to the Governor's Office of Youth, Faith and Family by **the due date and time**. Allow for such contingencies as heavy traffic, weather, directions, parking, security, etc. Verify that your express delivery service provider delivers packages directly into Suite 230.
 - Applicants are cautioned not to rely on next day U.S. Postal mail services. Mail sent to the Governor's Office of Youth, Faith and Family is filtered through the Arizona Department of Administration. The GOYFF is not responsible for packages delivered to locations other than the Governor's Office of Youth, Faith and Family, 1700 W. Washington, Suite 230, Phoenix, AZ 85007.

The point of contact concerning this application is referenced on the Offer and Acceptance Form.

_____, Date _____
Signature by the Point of Contact for Application

Job Title _____

GOYFF Staff Use Only

Name: _____ Date: _____

Job Title: _____

EXHIBIT B

Funds Requested Page

1. The Applicant must state a firm, fixed total guaranteed not-to-exceed amount of funds requested for The Arizona Parents Commission on Drug Education and Prevention Grant Program.

\$_____Total Funds Requested

2. Are you submitting this application for your proposed program as a faith-based organization?

☐ YES ☐ NO

3. Are you submitting this application for your proposed program under the rural, tribal or urban/county category? Each organization applying to the Arizona Parents Commission on Drug Education and Prevention Grant Program can apply for ONLY ONE category.

☐ RURAL ☐ TRIBAL ☐ URBAN/COUNTY/STATEWIDE

4. What is the target population for your proposed program?

TARGET POPULATION: _____

5. What number of participants will be served through this program?

Number of adults (parents/caregivers) to be served directly (unduplicated)	
Number of youth to be served directly (unduplicated)	
Number of adults to be served indirectly	
Number of youth to be served indirectly	
Number of families to be served	

EXHIBIT C
SAMPLE
Line Item Budget

This exhibit is provided as an example only. While you must use this format, you may reproduce it with Word Processing or Spreadsheet software. Limit your budget line items to the following categories: Personnel, Fringe Benefits, Contracted/Professional Services, Travel (In-State/Out of State), Pass-Thru, Other Operating Expenses and Administrative/Indirect Costs. **Please round budget category totals to the nearest dollar.**

Budget period: July 1, 2016 – June 30, 2017

Budget Category	Line Item	Requested Funds	Total Cost
Personnel	Project Director, Bob Williams, 95%, 12 months, (\$45000 X .75= \$33,750)	\$33,750	\$33,750
	Project Director, Bob Williams, 5%, 12 months, (\$45000 X .05= \$2,250)	\$2,250	\$2,250
	Project Specialist, Linda Smith, 25%, 12 months, (\$35000 x .25 = \$8750)	\$8,750	\$8,750
Personnel Subtotal		\$44,750	\$44,750
Fringe Benefits	Agency Rate (18%) - Budget narrative should provide calculation of how agency rate was determined. (\$44,750 total Personnel Costs X .18 = \$8,055)	\$8,055	\$8,055
Fringe Subtotal		\$8,055	\$8,055
Contracted / Professional Services	Consultant 20 hours x \$50/hr.	\$1,000	\$1,000
Contracted/Professional Services Subtotal		\$1,000	\$1,000
In-State Travel	Linda Smith to attend program related workshop in Tucson (200 miles x .445/mile)	\$89	\$89
In-State Travel Subtotal		\$89	\$89
Out of State Travel	Bob Williams to attend mandatory training in Los Angeles, CA (Hotel \$129/night x 1 night; Per Diem \$44/day x 1 day; Airfare \$200)	\$373	\$373
Out of State Travel Subtotal		\$373	\$373
Pass-Thru	Please see narrative.		
Pass-Thru Subtotal			
Other Operating Expenses	Postage (\$100/month x 12 months for monthly flier)	\$1,200	\$1,200
	Telephone for Bob Williams (\$90/month x 12 months)	\$1,080	\$1,080
OOE Subtotal		\$2,280	\$2,280
Direct Costs Subtotal		\$56,547	\$56,547
Administrative / Indirect Costs	Please see narrative.	\$5,655	\$5,655
Total		\$62,202	\$62,202

***As shown, a line item budget justification for each component MUST be included in the application that describes the procedure for determining the cost of budget categories. Detail in the line item budget narrative strengthens applications. See the following page for budget narrative format.**

EXHIBIT D

SAMPLE

Budget Narrative

The purpose of the budget narrative is to provide greater detail on the budget line items and the requested amounts. The budget narrative should explain the criteria used to compute the budget figures on the budget form. Please verify that the narrative and budget form correspond and the calculations and totals are accurate.

Personnel: Include information such as position title(s), name of employee (if known), annual salary, time to be spent on this program (hours or %), number of months assigned to this program, etc. If you need additional fiscal personnel to manage this grant, include those costs also. Provide the calculation used to determine the requested funding amount for each individual (i.e. Bob Williams \$45,000 Annual Salary x .75 FTE = \$33,750).

All organizations are required to maintain appropriate documentation to support salaries and wages per 2 CFR Part 200. All organizations will be monitored to assure compliance with this requirement.

Fringe Benefits: Provide a list of the fringe benefit costs and their respective percent of salary (See example below). Indicate any special rates for part-time employees, if applicable. Explain how the benefits for each position were determined.

Example list:

Fringe Benefit	Percent of Salary
Payroll Tax	.094
Worker's Comp	.020
Medical and Dental Insurance	.066
Total Fringe Benefit Rate	.18

Contracted Services/Professional Services: If contracted services/professional services are proposed in the budget, define how the costs for these services were determined and provide justification for the services related to the project. This category includes Evaluation Services. Information for Evaluation Professional Services should include who will be performing the evaluation, the type of work to be performed, and a listing of all applicable rates. Provide the units x rate calculation to show how the requested funding amount was determined (i.e. 20 Hours x \$50/hr = \$1,000). Explain how all contracts will be procured. The Grantee will be required to submit a copy of the executed contract before any related costs will be reimbursed.

Travel: Travel costs are according to the Applicant's written policy. Include a detailed breakdown of the travel costs (i.e. lodging, mileage, per diem, etc.) Indicate the location(s) of travel, the justification for travel as it relates to the program, and how many employees will attend.

Pass Through/Sub-grants: In the event that this application represents a collaboration and the Applicant will be utilizing other Sub-grantees to perform various components of the program, include the Sub-grantee name, the work the Sub-grantee will perform, the dollar limit of the sub-grant and how it was determined, and the term of the sub-grant). Also include monitoring policies that will be utilized to assure compliance.

Supplies and Operating Expenses: List the supplies and other operating expenses and justify the need for the items. Identify the monthly cost for re-occurring expenses (i.e. rent, utilities, general office supplies, printing, etc.) If building rent is requested, please indicate the method used to allocate the appropriate amount of rent to the program. Provide the item cost for infrequent purchases (i.e. telephone unit, registration fee, training cost, etc.). All purchases should be made according to the Applicant's written procurement policy, which at a minimum must contain the federal procurement guidelines for federal grants.

Administrative/Indirect Costs: Administrative costs are the general or centralized expenses necessary for the overall administration of an organization. Administrative costs do not include particular project costs. For organizations that have an established federally approved indirect cost rate for Federal awards, indirect costs mean those costs that are included in the organization's indirect cost rate. Such costs are generally identified with the organization's overall operation and are further described in the Office of Management and Budget Circulars 2 CFR 200.

For the purposes of this grant, Grantees may be permitted an allocation for administrative costs under one of the following:

Scenario A: Administrative Costs: If the Applicant does not have a federally approved indirect cost rate, the Applicant may include an allocation for administrative costs for up to 10% of the total direct funds requested.

Provide a list of the Applicant's requested administrative costs items and the corresponding cost of each item. Also, include a copy of the written allocation policy for these costs.

Scenario B: Federally Approved Indirect Costs: If the Applicant has a federally approved indirect cost rate agreement in place, the Applicant may include an allocation for indirect costs. Applicants must provide a copy of their federally approved indirect cost rate agreement.

Indirect costs are costs of an organization that are not readily assignable to a particular project, but are necessary to the operation of the organization and the performance of the project. The cost of operating and maintaining facilities, depreciation, and administrative salaries are examples of the types of costs that are usually treated as indirect. Please be advised that indirect costs will be considered in determining the cost effectiveness of your program.

EXHIBIT E

Disclosure of Other Funding Sources

Please list all other funding that your organization currently receives from State or Public Agencies, Federal Agencies, Non-Profit Organizations, or any other source providing funding **for the proposed program***. In addition, please list in-kind contributions such as donations, volunteers, supplies and materials, etc. to be utilized for the proposed program*. Use a continuation sheet if necessary. The following form may be reproduced with word processing software or another form may be created that contains all the information requested.

Type of Funding (Federal, State, local, other)	Received From	Amount	End Date (If Applicable)
TOTAL:			

Type of In-Kind Funding (Donations, volunteer time, supplies, etc.)	Received From	Value	End Date (If Applicable)
TOTAL:			

***This table should include only those funds that will support the program detailed in this application.**

EXHIBIT F

Disclosure of Other Funding Sources

(Prevention Programs in your organization)

Please list all other funding that your organization currently receives from State or Public Agencies, Federal Agencies, Non-Profit Organizations, or any other sources that contribute and support **prevention programs in your organization***. In addition, please list in-kind contributions such as donations, volunteers, supplies and materials, etc. to be utilized for the proposed program*. Use a continuation sheet if necessary. The following form may be reproduced with word processing software or another form may be created that contains all the information requested.

Type of Funding (Federal, State, local, other)	Received From	Amount	End Date (If Applicable)
TOTAL:			
Type of In-Kind Funding (Donations, volunteer time, supplies, etc.)	Received From	Value	End Date (If Applicable)
TOTAL:			

***This table should include any sources that contribute and support prevention programs in your organization.**

EXHIBIT G

Staff Overview

The following form may be reproduced with word processing software or another form may be created that contains all the information requested.

In addition to this overview, please attach a resume (for current personnel) or a job description (for positions to be hired) for the key individuals involved in the project.

STAFF MEMBER	BACKGROUND AND EXPERTISE OF PERSONNEL
Name: Title: Annual Salary: What percent of time will be spent on this project:	
Name: Title: Annual Salary: What percent of time will be spent on this project:	
Name: Title: Annual Salary: What percent of time will be spent on this project:	
Name: Title: Annual Salary: What percent of time will be spent on this project:	
Name: Title: Annual Salary: What percent of time will be spent on this project:	

EXHIBIT H

Applicant's Proposed Subcontractor(s)

Applicant's Name: _____

The Applicant shall indicate all subcontractors that the Applicant will use to perform any portion of this solicitation's Scope of Work.

If the Applicant will not subcontract any portion of this solicitation's Scope of Work and will be performing this solicitation's Scope of Work entirely with its own employees, the Applicant shall clearly indicate this by checking **No** in the section below.

If any subcontractors will be used, the Applicant shall clearly indicate this by checking **Yes** in the section below and follow the instructions contained in the paragraph for identifying all subcontractors.

- _____ No The above Applicant will not subcontract any portion of performance of any resultant Contract under this solicitation.
- _____ Yes The above Applicant will use the subcontractor(s) listed below in performance of any resultant Contract under this solicitation.

The Applicant shall list below each subcontractor's name/location, the type of service to be provided, the certifications they possess (copies of all certifications shall be provided as an attachment to the submitted proposal) and the amount of time or effort (as a percent of total Contract performance) that the subcontractor will perform in relation to total performance of this solicitation's requirements. Additional pages may be used if necessary.

The Applicant shall describe the quality assurance measures that the Applicant will use to monitor the subcontractor's performance as part of the response to the response to Questionnaire Item 1.7.

The State reserves the right to request any additional information deemed necessary about any proposed subcontractors.

SUBCONTRACTOR INFORMATION

Name/Location	Type of Service	Certifications	Percent of time on Project

EXHIBIT I

Governor's Office of Youth, Faith and Family Standard Data Collection Form for the Grant Management Information System (GIMS)

A. Fiscal Agent Information:

Agency Name _____ Contact Person _____
Address _____ Position _____
_____ Email _____
City, State, Zip _____ Phone _____ x _____
County _____
Employer Identification Number: _____ DUNS Number: _____
Agency Classification: _____ State Agency _____ County Government _____ Local Government _____ Schools _____ Tribal
_____ Faith Based _____ Non-Profit _____ Other
In which Congressional (Federal) District is your agency? Enter District # _____
<http://www.azredistricting.org> (click on Final Maps)
In which Legislative (State) District is your agency? Enter District # _____
<http://www.azredistricting.org> (click on Final Maps)
Have you previously conducted business with the State using this EIN: **Y N**. If **NO**, please go to the following website, download the State of Arizona Substitute W-9 Form and submit with your application. <http://www.gao.state.az.us/onlineforms>

What was the date of your most recent SAM/CCR registration? _____ * Please attach confirmation of registration.

Preferred method for reimbursements (ACH or mailed check)? _____ ACH _____ Agency Fiscal Address (listed above)

Preferred reimbursement cycle: _____ Monthly _____ Quarterly

B. Contract Signer Information:

Contract Signer _____ Position _____
Address _____ Email _____
_____ Phone _____ x _____
City, State, Zip _____ County _____

C. Financial Information:

Approximately how much FEDERAL funding will your organization expend in your current fiscal year? \$ _____

What is your organization's fiscal year-end date? _____

Accounting Method: _____ Cash _____ Accrual _____ Modified

Is your organization subject to the requirements of an annual independent audit in accordance with OMB Circular A-133? **Y N**

Please provide contact information of the audit firm conducting your audit:

Agency _____

Address _____

Phone Number _____

D. Program Agency Information:

Agency Name _____ Contact Person _____

Address _____ Position _____

_____ Email _____

City, State, Zip _____ Phone _____ x _____

County _____

E. Proposed Program Information / Description:

Amount requesting: _____

Service area of proposed program: _____

Target population of proposed program: _____

Number of participants to be served: _____

Authorized Signer

Date

(TO BE COMPLETED BY GOYFF PERSONNEL)

Contract Number: _____

Is the Sub-Grantee's Audit Current? Yes _____ No _____

Funding Index: _____

Any Special terms and conditions to be included in Contract: _____

Program Administrator

Date

Grant Auditor

Date

EXHIBIT J
Governor's Office of Youth, Faith and Family
Financial Systems Survey

Name of Applicant: _____

Please answer every question by filling in the circle next to the correct answer. Attach materials and document comments as required.

As stewards of federal and state funds, the Governor's Office of Youth, Faith and Family awards funds to organizations (regardless of how small or large) that are both capable of achieving project goals/objectives and upholding their responsibility for properly managing funds as they achieve those objectives.

This survey will be used primarily for initial monitoring of the organization. This survey may also be used in evaluating the financial capability of the organization in the award process. Deficiencies should be addressed for corrective action and the organization should consider procuring technical assistance in correcting identified problems.

A. GENERAL INFORMATION

1. Has your organization received a Federal or State Grant within the last two years?	<input type="radio"/> YES <input type="radio"/> NO
2. Is your organization subject to the requirements of the A-133 Single Audit Act? If yes, please attach a complete copy of your A-133 Audit, including, but not limited to, your Management Letter, Findings and Questioned Costs.	<input type="radio"/> YES <input type="radio"/> NO
3. If your organization is not subject to the A-133, have your financial statements been audited, reviewed or compiled by an independent Certified Public Accountant within the past two years? If yes, please attach a complete copy of the most recent audited, reviewed or compiled financial statements. If no, attach a copy of the most recently prepared financial statements including a balance sheet, income statement, statement of cash flows and a description of the source of the documents.	<input type="radio"/> YES <input type="radio"/> NO
4. Please attach a schedule showing the TOTAL federal funds (by granting agency) expended by your agency for the most recent fiscal year. Note: If your organization had an A-133 Single Audit, a copy of the "Schedule of Expenditures for Federal Awards" can be submitted	
5. Is your organization required to file an IRS Form 990? If so, please attach.	<input type="radio"/> YES <input type="radio"/> NO
6. Has your organization received funding from the Governor's Office of Youth, Faith and Family within the past two years? If yes, specify the grant contract numbers: _____ _____ _____ _____	<input type="radio"/> YES <input type="radio"/> NO
7. Has your organization been granted tax-exempt status by the Internal Revenue Service?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A
8. If you answered YES to question #6, under what section of the IRS code? <input type="radio"/> 501 C (3) <input type="radio"/> 501 C (4) <input type="radio"/> 501 C (5) <input type="radio"/> 501 C (6) <input type="radio"/> Other. Specify: _____	
9. Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?	<input type="radio"/> YES <input type="radio"/> NO

B. FUNDS MANAGEMENT

1. Which of the following describes your organization's accounting system?	<ul style="list-style-type: none">○ Manual○ Automated○ Combination
2. How frequently do you post to the General Ledger?	<ul style="list-style-type: none">○ Daily○ Weekly○ Monthly○ Other
3. Does the accounting system completely and accurately track the receipt and disbursements of funds by each grant or funding source?	<ul style="list-style-type: none">○ YES○ NO
4. Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?	<ul style="list-style-type: none">○ YES○ NO
5. Are time and effort distribution reports maintained for employees working fully or partially on state or federal grant programs which account for 100% of each employee's time?	<ul style="list-style-type: none">○ YES○ NO
6. Is your organization familiar with Federal Cost Principles (i.e. 2 CFR Part 200)?	<ul style="list-style-type: none">○ YES○ NO
7. How does your organization plan to charge common/indirect costs to this grant? NOTE: Those organizations using an indirect cost plan/rate need to attach a copy of the methodology and calculations in determining the rate.	<ul style="list-style-type: none">○ Direct Charges○ Utilizing an Indirect Cost Allocation Plan or Rate

C. INTERNAL CONTROLS

1. Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?	<ul style="list-style-type: none">○ YES○ NO
2. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?	<ul style="list-style-type: none">○ YES○ NO
3. Are all accounting entries and payments supported by source documentation?	<ul style="list-style-type: none">○ YES○ NO
4. Are cash or in-kind matching funds supported by source documentation?	<ul style="list-style-type: none">○ YES○ NO
5. Are employee time sheets supported by appropriately approved/signed documents?	<ul style="list-style-type: none">○ YES○ NO
6. Does the organization maintain policies that include procedures for assuring compliance with applicable cost principles and terms of each grant award?	<ul style="list-style-type: none">○ YES○ NO

D. PROCUREMENT

1. Does the organization maintain written codes of conduct for employees involved in awarding or administering procurement contracts?	<ul style="list-style-type: none">○ YES○ NO
2. Does the organization conduct purchases in a manner that encourages open and free competition among vendors?	<ul style="list-style-type: none">○ YES○ NO
3. Does the organization complete some level of cost or price analysis for every major purchase?	<ul style="list-style-type: none">○ YES○ NO
4. Does the organization maintain a system of contract administration to ensure Grantee conformance with the terms and conditions of each contract?	<ul style="list-style-type: none">○ YES○ NO
5. Does the organization maintain written procurement policies and procedures?	<ul style="list-style-type: none">○ YES○ NO

E. CONTACT INFORMATION

Please indicate the following information. In the event that the Governor's Office of Youth, Faith and Family has questions about this survey, this individual will be contacted.

Prepared By: _____

Job Title: _____

Date: _____

Phone/Fax/Email: _____

F. CERTIFICATION

I certify that this report is complete and accurate, and that the Grantee has accepted the responsibility of maintaining the financial systems.

Signature

G. COMMENT AND ATTACHMENTS

Please use the space below to comment on any answers in Sections A – D. Please indicate the Section and Question # next to each comment.

Number of Attachments (please number each attachment): _____

COMMENTS:

EXHIBIT K

Goals, Outcome Objectives and Performance Measures

In the table below, state the goal(s) that will address the identified problem/need. Use a continuation sheet if necessary. The following table may be reproduced with word processing software to replicate the number of tables to match the proposed program's number of goals.

Goal:			
Rationale (How does this goal address the identified problem/need and selected risk/protective factors?):			
Targeted Outcome(s) (Check all that apply): <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Parental Stress</div> <div style="width: 33%;"><input type="checkbox"/> Adult Attitudes of Youth Substance Use</div> <div style="width: 33%;">Other (Please Specify)</div> <div style="width: 33%;"><input type="checkbox"/> Family Cohesion</div> <div style="width: 33%;"><input type="checkbox"/> Youth Perception of Parental Attitudes of Youth Substance Use</div> <div style="width: 33%;"><input type="checkbox"/></div> <div style="width: 33%;"><input type="checkbox"/> Family Management</div> <div style="width: 33%;"><input type="checkbox"/> Adult Perception of Risk/Harm of Youth Substance Use</div> <div style="width: 33%;"><input type="checkbox"/></div> <div style="width: 33%;"><input type="checkbox"/> Family Connectedness</div> <div style="width: 33%;"><input type="checkbox"/> Youth Perception of Family Involvement</div> <div style="width: 33%;"><input type="checkbox"/></div> <div style="width: 33%;"><input type="checkbox"/> Family Involvement</div> <div style="width: 33%;"><input type="checkbox"/> Youth Perception of Risk/Harm of Substance Use</div> <div style="width: 33%;"><input type="checkbox"/></div> <div style="width: 33%;"><input type="checkbox"/> Family Conflict</div> <div style="width: 33%;"><input type="checkbox"/> Youth Perception of Family Cohesion</div> <div style="width: 33%;"></div> </div>			
OUTCOME OBJECTIVE(s) pertaining to this goal: (EXAMPLE) 1. By June 30, 2017, parents and caregivers participating in the ABC Parenting Program classes will show a 15% increase in parenting skills as measured by retrospective pre-test.			
Performance Measure(s)	Definition(s) include data source	Tools/process for collection	Explain how the performance measure demonstrates progress towards the goal
Example: Number and percent of parents exhibiting desired change in parenting skills.	Example: The number and percent of parents who have exhibited the desired change (10% increase) in parenting skills during the reporting period (Data Source - Self-report data through retrospective post-survey).	Example: A retrospective post-survey will be administered to all adult participants during the 13 th session of the ABC Parenting Program	Example: For purposes of this performance outcome measure, parenting skills is conceptualized as a measure of family management skills. The desired change in parenting skills is a 15% increase in parental perception of their family management skills after participation in the program. An increase in the family management skills construct is correlated with increased parent / caregiver involvement.

OUTPUT OBJECTIVE(s) pertaining to this goal: (EXAMPLE) 1. By June 30, 2017, increase capacity of parent and caregiver involvement by providing family strengthening opportunities for families as measured by enrollment of at least 40 parents/caregivers and an 80% completion rate for enrolled parents.			
Performance Measure(s)	Definition(s) include data source	Tools/process for collection	Explain how the performance measure demonstrates progress towards the goal
Example: Number of individuals directly served	Example: The number of individuals enrolled in the parent education program during the reporting period. Enrolled is defined as attending the first class. Attendance rates will be calculated by the number of sessions attended divided by the total number of sessions in the program. (Data Source – Enrollment and Attendance Logs)	Example: An attendance sheet will be circulated at each session and completed by each individual attending the class. An attendance log will be maintained with the attendance rate calculated at the end of the program cycle.	Example: Progress toward goal of increasing / enhancing involvement by expanding family strengthening opportunities to 40 parents during the funding period will be measured by counting the number of parents (parents/caregivers) enrolled. The target output is 10 parents served per program cycle and at least one adult and one child (aged 10-14) per family unit.

Goal:			
Rationale (How does this goal address the identified problem/need and selected risk/protective factors?):			
Targeted Outcome(s) (Check all that apply): <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <input type="checkbox"/> Parental Stress <input type="checkbox"/> Family Cohesion <input type="checkbox"/> Family Management <input type="checkbox"/> Family Connectedness <input type="checkbox"/> Family Involvement <input type="checkbox"/> Family Conflict </div> <div style="width: 30%;"> <input type="checkbox"/> Adult Attitudes of Youth Substance Use <input type="checkbox"/> Youth Perception of Parental Attitudes of Youth Substance Use <input type="checkbox"/> Adult Perception of Risk/Harm of Youth Substance Use <input type="checkbox"/> Youth Perception of Family Involvement <input type="checkbox"/> Youth Perception of Risk/Harm of Substance Use <input type="checkbox"/> Youth Perception of Family Cohesion </div> <div style="width: 30%;"> Other (Please Specify) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>			
OUTCOME OBJECTIVE(s) pertaining to this goal:			
Performance Measure(s)	Definition(s) include data source	Tools/process for collection	Explain how the performance measure demonstrates progress towards the goal
OUTPUT OBJECTIVE(s) pertaining to this goal:			

EXHIBIT L

Implementation Plan

The following form may be reproduced with word processing software or another form may be created that contains all the information requested. Sequentially list the key tasks and activities needed to implement the strategies/approaches including timelines and responsibilities as they relate to the achievement of the task. In the final column, list how the effectiveness of the implementation will be measured (e.g. number of participants attending/completing, participant satisfaction, adequacy of resources, timely completion of activities, etc.)

STRATEGY	KEY TASK	ACTIVITIES	PERSON RESPONSIBLE	BY WHEN	AS MEASURED BY

ATTACHMENT A

Terms and Conditions

I. **Term Of Contract**

The term of the Contract, if awarded, shall commence July 1, 2016 and shall remain in effect until June 30, 2017, contingent upon final State award, unless terminated, canceled or extended as otherwise provided herein. This is a twelve month Contract with renewable options for up to two additional twelve month periods in the sole discretion of the Governor's Office of Youth, Faith and Family, contingent upon the availability of funds, compliance with terms and conditions, programmatic and financial performance, results of program and fiscal monitoring and a program sustainability plan, and through the submission of a renewal application.

II. **Grant Program Administration**

The Governor's Office of Youth, Faith and Family shall be responsible for overall management of the Arizona Parents Commission on Drug Education and Prevention Grant Program. Awardees will be provided a contact name and number for staff responsible for management of this program. Program monitoring will be the responsibility of the Governor's Office of Youth, Faith and Family and fiscal monitoring will be the responsibility of the Governor's Accounting Office. The Governor's Office of Youth, Faith and Family is responsible for all activities related to submission, review of applications, awarding of contracts, and all subsequent program monitoring.

III. **Contract Renewal**

The Contract shall not bind nor purport to bind the Grantor for any contractual commitment in excess of the original Contract period or amount. The Grantor shall have the right, at its sole and unfettered discretion, whether or not to extend this Contract. If so, the parties must execute a written amendment or a new Contract. Consideration for renewal will also be based on results of program and fiscal monitoring.

IV. **Amendments**

This Contract is issued under the authority of the authorized Governor's Office representative who signed this Contract. The Contract may be modified only through a Contract Amendment within the scope of the Contract. Changes to the Contract, including the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by a person who is not specifically authorized by the procurement officer in writing or made unilaterally by the Grantee are violations of the Contract and of applicable law. Such changes, including unauthorized written Contract Amendments shall be void and without effect, and the Grantee shall not be entitled to any claim under this Contract based on those changes.

V. **Audit Of Nonprofit Corporations Receiving State Monies; Definition Update**

A.R.S. 35-181.03

A. All state contracts with nonprofit corporations for assistance shall include requirements concerning financial and compliance audits.

B. Each nonprofit corporation that receives in excess of two hundred fifty thousand dollars in state assistance in any fiscal year shall file for each such fiscal year at the corporation's expense with the grantor agency either audited financial statements prepared in accordance with federal single audit regulations or financial statements prepared in accordance with generally accepted accounting principles and audited by an independent certified public accountant.

C. Each nonprofit corporation receiving two hundred fifty thousand dollars or less in state assistance in any fiscal year shall comply with contract requirements concerning financial and compliance audits contained in contract agreements governing such programs.

D. A nonprofit that is not subject to audit requirements shall submit two copies of the most recently prepared financial statements including a Balance Sheet, Income Statement, and Statement of Cash Flows along with a description of the source of the documents.

E. For the purposes of this section, "nonprofit corporation" means a corporation as defined in A.R.S. § 10-3140.

VI. **IRS Form 990**

All 501(c)(3) organizations and other federally tax-exempt organizations that are required to file the annual reporting return, Form 990, to the Internal Revenue Service must attach a copy of their most recently filed Form 990 and related schedules, directly behind the audit report in the application materials.

VII. **Fund Management**

The Grantee must maintain funds received under this Contract in separate ledger accounts and shall not combine these funds with other sources.

The Grantee must maintain adequate business systems for:

- a. Financial Management
- b. Procurement
- c. Personnel
- d. Property
- e. Travel

A system is adequate if it is: 1) **written**; 2) **consistently followed** – it applies in all similar circumstances; and 3) **consistently applied** – it applies to all sources of funds. The Governor's Office of Youth, Faith and Family reserves the right to review all business systems policies.

VIII. **Documents Incorporated By Reference**

The State of Arizona's Uniform Terms and Conditions V9_ (Rev 7-1-2013) are incorporated into this document as if fully set forth herein. Copies of the Uniform Terms and Conditions may be accessed at https://spo.az.gov/sites/default/files/documents/files/Uniform%20Terms%20and%20Conditions%20V9_%28Rev%207-1-2013%29.pdf. This Attachment A, Terms and Conditions, is incorporated by reference into this document in its entirety as fully set forth herein. This Attachment B, Indemnification and Insurance Requirements, is incorporated by reference into this document in its entirety as fully set forth herein. If awarded a Contract, Applicant warrants that it has read and understands the Uniform Terms and Conditions V9_(Rev 7-1-13), Attachment A, and Attachment B and agrees to be bound by them in their entirety. In the event of any divergence between this RFGA solicitation and the Uniform Terms and Conditions, this RFGA solicitation shall control.

IX. **Cost Reimbursement Contracts**

Successful Applicants that become Grantees shall be paid on a cost-reimbursement basis only for expenditures approved in their Application budget and budget narrative. The Grantee shall not request reimbursement until the cost has resulted in an actual cash expenditure. The Grantee may request reimbursement on a monthly basis for those items submitted and approved in the budget inclusively. Grantee shall submit a final reimbursement request no more than thirty (30) days after the Contract terminates for expenses incurred prior to the date of Contract termination. All expenses must be incurred and paid prior to the final reimbursement request. Requests for reimbursement received later than thirty (30) days after the Contract termination will not be paid. If awarded a Contract, your organization must have sufficient funds to meet obligations for up to sixty (60) days while awaiting reimbursements from the Governor's Office of Youth, Faith and Family. The Grantee shall use the forms provided by the Grantor to submit financial expenditure reports.

A. Financial reimbursements must be sent to:

Kayleigh Larkins
Grant Auditor
Governor's Accounting Office
1700 West Washington, Suite 500
Phoenix, Arizona 85007

B. Programmatic reports and requests for program and budget changes must be sent to:

Sonya Pierce-Johnson
Program Administrator
Governor's Office of Youth, Faith and Family
1700 West Washington, Suite 230
Phoenix, Arizona 85007

C. Notwithstanding any other payment provision of this Contract, failure of the Grantee to submit required reports when due, or failure to perform or deliver required work, supplies, or services, will result in the withholding of payment under this Contract unless such failure arises due to causes beyond the control and without the fault or negligence of the Grantee.

X. **Reports**

Successful Applicants that become Grantees agree to the submission of monthly reports pertaining to activities and outputs as well as quarterly progress reports related to the program's outcome objectives. The reports will collect information deemed necessary by the Governor's Office of Youth, Faith and Family. Failure to submit timely reports may result in suspension of reimbursement.

XI. **Statewide Evaluation**

Successful Applicants that become Grantees agree to participate in the statewide evaluation and meet the data collection and data submission requirements that will be outlined in the award letter. Failure to submit may result in suspension of reimbursement.

XII. **Arizona Substance Abuse Partnership Locator**

Successful Applicants that become Grantees agree to ensure that all coalition, agency or organizational information on the Arizona Substance Abuse Partnership (ASAP) Locator is accurate and updated on a regular basis. The Arizona Substance Abuse Partnership (ASAP) Locator may be accessed at SubstanceAbuse.AZ.gov. To update your ASAP Locator profile or add additional programs and/or locations, please email azsubstanceabusepartnership@gmail.com to receive update instructions. Failure to review and update pertinent information on the Arizona Substance Abuse Partnership (ASAP) Locator may result in suspension of reimbursement. The ASAP locator will be discussed in detail during the Parents Commission Subgrantee Orientation.

XIII. **Notification of Program Changes**

Successful Applicants that become Grantees agree to notify the Governor's Office of Youth, Faith and Family in writing, thirty (30) calendar days in advance, of any changes in the program that will directly affect service delivery under the terms of the Contract. No changes shall be implemented without the prior written approval of a formal Contract amendment issued by the Governor's Office of Youth, Faith and Family.

XIV. **Relationship of Parties**

The individuals/parties performing work on behalf of the Grantee, their Sub-Grantee or their Sub-Contractors are not employees, servants, agents, partners, or joint venturers of the State of

Arizona or the Governor's Office of Youth, Faith and Family. The State of Arizona and the Governor's Office of Youth, Faith and Family retain no control or direction over such individuals/parties or over the detail, manner, or methods of performance of their services, and they do not have the authority to supervise or control their work. The individuals/parties performing work on behalf of the Grantee, their Sub-Grantee or their Subcontractors are not entitled to receive benefits that employees of the State of Arizona are entitled to receive, including but not limited to, workers' compensation, unemployment compensation, health, vision, or dental insurance, retirement benefits, annual leave, and holiday pay.

XV. **Other**

Successful Applicants that become Grantees have participated fully in the negotiation and preparation of the Contract. Any rule of construction to the effect that ambiguities are to be resolved against the drafting party shall not apply in interpreting this Contract. The parties acknowledge they have been advised by counsel, or have had the opportunity to be advised by counsel, in the negotiation and execution of the Contract.

Successful Applicants that become Grantees will follow all applicable laws, rules, and regulations in the performance of work in furtherance of the RFGA solicitation and application.

ATTACHMENT B

Indemnification and Insurance Requirements

1.1 Indemnification Clause

To the fullest extent permitted by law, Grantee shall defend, indemnify, and hold harmless the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees (hereinafter referred to as "Indemnatee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Grantee or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of, or recovered under, the Workers' Compensation Law or arising out of the failure of such Grantee to conform to any federal, state, or local law, statute, ordinance, rule, regulation, or court decree. It is the specific intention of the parties that the Indemnatee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnatee, be indemnified by Grantee from and against any and all claims. It is agreed that Grantee will be responsible for primary loss investigation, defense, and judgment costs where this indemnification is applicable. In consideration of the award of this Contract, the Grantee agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents, and employees for losses arising from the work performed by the Grantee for the State of Arizona.

This indemnity shall not apply if the Grantee or Sub-grantee(s) is/are an agency, board, commission or university of the State of Arizona.

1.2 Insurance Requirements

1.2.1 Grantee, Sub-grantees and subcontractors shall procure and maintain, until all of their obligations have been discharged, including any warranty periods under this Contract, insurance against claims for injury to persons or damage to property arising from, or in connection with, the performance of the work hereunder by the Grantee, its agents, representatives, employees or subcontractors.

1.2.2 The Insurance Requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Grantee from liabilities that arise out of the performance of the work under this Contract by the Grantee, its agents, representatives, employees or subcontractors, and the Grantee is free to purchase additional insurance.

1.3 Minimum Scope and Limits of Insurance

Grantee shall provide coverage with limits of liability not less than those stated below.

1.3.1 Commercial General Liability (CGL) – Occurrence Form

Policy shall include bodily injury, property damage, and broad form contractual liability coverage.

General Aggregate	\$2,000,000
Products – Completed Operations Aggregate	\$1,000,000
Personal and Advertising Injury	\$1,000,000
Damage to Rented Premises	\$50,000
Each Occurrence	\$1,000,000

- a. The policy shall include coverage for Sexual Abuse and Molestation. This coverage may be sub-limited to no less than \$500,000. The limits may be included within the

General Liability limit, provided by separate endorsement with its own limits, or provided as separate coverage included with the Professional Liability.

- b. Grantee must provide the following statement on their Certificate(s) of Insurance: "Sexual Abuse and Molestation coverage is included" or "Sexual Abuse and Molestation coverage is not excluded."
- c. The policy shall be endorsed, as required by this written agreement, to include the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Grantee.
- d. Policy shall contain a waiver of subrogation endorsement, as required by this written agreement, in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Grantee.

1.3.2 Business Automobile Liability

Bodily Injury and Property Damage for any owned, hired, and/or non-owned automobiles used in the performance of this Contract.

Combined Single Limit (CSL) \$1,000,000

- a. Policy shall be endorsed, as required by this written agreement, to include the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees as additional insureds with respect to liability arising out of the activities performed by, or on behalf of, the Grantee involving automobiles owned, hired and/or non-owned by the Grantee.
- b. Policy shall contain a waiver of subrogation endorsement as required by this written agreement in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Grantee.

1.3.3 Workers' Compensation and Employers' Liability

Workers' Compensation Statutory

Employers' Liability

Each Accident \$1,000,000

Disease – Each Employee \$1,000,000

Disease – Policy Limit \$1,000,000

- a. Policy shall contain a waiver of subrogation endorsement, as required by this written agreement, in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Grantee.
- b. This requirement shall not apply to each Grantee or subcontractor that is exempt under A.R.S. § 23-901, and when such Grantee or subcontractor executes the appropriate waiver form (Sole Proprietor or Independent Grantee).

1.3.4 Professional Liability (Errors and Omissions Liability)

Each Claim \$ 2,000,000

Annual Aggregate \$ 2,000,000

- a. If SAM coverage is being provided under this policy then Grantee must provide the following statement on their Certificate(s) of Insurance: "Sexual Abuse and Molestation coverage is included" or "Sexual Abuse and Molestation coverage is not excluded."
- b. In the event that the professional liability insurance required by this Contract is written on a claims-made basis, Grantee warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage

- will be maintained or an extended discovery period will be exercised for a period of two (2) years beginning at the time work under this Contract is completed.
- c. Policy shall cover professional misconduct or wrongful acts for those positions defined in the Scope of Work of this Contract.

1.4 Additional Insurance Requirements

The policies shall include, or be endorsed to include, as required by this written agreement, the following provisions:

- 1.4.1 The Grantee's policies, as applicable, shall stipulate that the insurance afforded the Grantee shall be primary and that any insurance carried by the Governor's Office of Youth, Faith and Family, its agents, officials, employees or the State of Arizona shall be excess and not contributory insurance, as provided by A.R.S. § 41-621 (E).
- 1.4.2 Insurance provided by the Grantee shall not limit the Grantee's liability assumed under the indemnification provisions of this Contract.

1.5 Notice of Cancellation

Applicable to all insurance policies required within the Insurance Requirements of this Contract, Grantee's insurance shall not be permitted to expire, be suspended, be canceled, or be materially changed for any reason without thirty (30) days prior written notice to the State of Arizona. Within two (2) business days of receipt, Grantee must provide notice to the State of Arizona if they receive notice of a policy that has been or will be suspended, canceled, materially changed for any reason, has expired, or will be expiring. Such notice shall be sent directly to the Governor's Accounting Office, 1700 W. Washington, Suite 500, Phoenix, Arizona 85007.

1.6 Acceptability of Insurers

Grantee's insurance shall be placed with companies licensed in the State of Arizona or hold approved non-admitted status on the Arizona Department of Insurance List of Qualified Unauthorized Insurers. Insurers shall have an "A.M. Best" rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Grantee from potential insurer insolvency.

1.7 Verification of Coverage

Grantee shall furnish the State of Arizona with certificates of insurance (valid ACORD form or equivalent approved by the State of Arizona) evidencing that Grantee has the insurance as required by this Contract. An authorized representative of the insurer shall sign the certificates.

- 1.7.1 All such certificates of insurance and policy endorsements must be received by the State before work commences. The State's receipt of any certificates of insurance or policy endorsements that do not comply with this written agreement shall not waive or otherwise affect the requirements of this agreement.
- 1.7.2 Each insurance policy required by this Contract must be in effect at, or prior to, commencement of work under this Contract. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of Contract.
- 1.7.3 All certificates required by this Contract shall be sent directly to the Governor's Accounting Office, 1700 W Washington, Suite 500, Phoenix, Arizona 85007. The State of Arizona project/Contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete copies of all insurance policies required by this Contract at any time.

1.8 Subcontractors

Grantee's certificate(s) shall include all subcontractors as insureds under its policies or Grantee shall be responsible for ensuring and/or verifying that all subcontractors have valid and collectable insurance as evidenced by the certificates of insurance and endorsements for each subcontractor.

All coverages for subcontractors shall be subject to the minimum Insurance Requirements identified above. The Governor's Office of Youth, Faith, and Family reserves the right to require, at any time throughout the life of the Contract, proof from the Grantee that its subcontractors have the required coverage.

1.9 Approval and Modifications

The Governor's Office of Youth, Faith, and Family, in consultation with State Risk, reserves the right to review or make modifications to the insurance limits, required coverages, or endorsements throughout the life of this Contract, as deemed necessary. Such action will not require a formal Contract amendment but may be made by administrative action.

1.10 Exceptions

In the event the Grantee or subcontractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a certificate of self-insurance. If the Grantee or subcontractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.

ATTACHMENT C
Sample Risk & Protective Factors

Risk Factors: Individual

- Inadequate life skills
- Lack of self control, assertiveness, and peer-refusal skills
- Low self-esteem and self-confidence
- Emotional and psychological problems
- Favorable attitudes toward substance use
- Rejection of commonly held values and religion
- School failure
- Lack of school bonding
- Early antisocial behavior, such as lying, stealing and aggression, particularly in boys, often combined with shyness or hyperactivity

Protective Factors: Individual

- Positive: personal characteristics, including social skills and social responsiveness, cooperativeness, emotional stability, positive sense of self, flexibility, problem-solving skills, low levels of defensiveness
- Bonding to societal institutions and values, including attachment to parents and extended family, commitment to school, regular involvement with religious institutions, belief in society's values.
- Social and emotional competence, including good communication skills, responsiveness, empathy and caring, including sense of humor, inclination toward prosocial behavior, problem-solving skills, sense of autonomy, sense of purpose and of the future (e.g., goal directedness) and self-discipline.

Risk Factors: Family

- Family conflict and domestic violence
- Family disorganization
- Lack of family cohesion
- Social isolation of family
- Heightened family stress
- Family attitudes favorable to drug use
- Ambiguous, lax or inconsistent rules and sanctions regarding substance use
- Poor child supervision and discipline
- Unrealistic expectations for development

Protective Factors: Family

- Positive bonding among family members
- Parenting that includes high levels of warmth and avoidance of severe criticism, sense of basic trust, high parental expectations, clear and consistent expectations and including children's participation in family decisions and responsibilities
- An emotionally supportive parental/family milieu, including parental attention to children's interests, orderly and structured parent-child relationships, parent involvement in homework and social-related activities.

Risk Factors: Peer

- Association with delinquent peers who use or value dangerous substances
- Association with peers who reject mainstream activities or pursuits
- Susceptibility to negative peer pressure
- Strong external locus of control

Protective Factors: Peer

- Association with peers who are involved in school, recreation, service, religion or other organized activities
- Friends disapproval of alcohol and other drug use

Risk Factors: School

- Ambiguous, lax or inconsistent rules and sanctions regarding drug use and student conduct
- Favorable staff and student attitudes toward substance use
- Harsh or arbitrary student management practices
- Availability of dangerous substances on school premises
- Lack of school bonding

Protective Factors: School

- Caring and support; sense of "community" in classroom and school
- High expectations from school personnel
- Clear standards and rules for appropriate behavior
- Youth participation, involvement, and responsibility in school tasks and decisions

Risk Factors: Community/Society

- Community disorganization
- Lack of community bonding
- Lack of cultural pride
- Lack of competence in majority culture
- Community attitudes favorable to drug use
- Ready availability of dangerous substances
- Inadequate youth services and opportunities for pro-social involvement
- Impoverishment
- Unemployment and underemployment
- Discrimination
- Pro-drug-use messages in the media
- Laws and ordinances are unclear or inconsistently enforced
- Norms are unclear or encourage use
- Residents feel little sense of "connection" to community
- Lack of monitoring youths' activities

Protective Factors: Community/Society

- Caring and support
- High expectations of youth
- Opportunities for youth participation in community activities
- Media literacy (resistance to pro-use messages)
- Decreased accessibility of drugs and alcohol
- Increased pricing through taxation
- Raised purchasing age and enforcement
- Stricter driving-while-under-the-influence laws
- Comprehensive risk focused programs available
- Policies and norms encourage non-use
- Laws and ordinances are consistently enforced
- Informal social control
- Community religious composition

ATTACHMENT D

Sample Certificate of Insurance

Prior to commencing services under this Contract, the contractor must furnish the state certification from insurer(s) for coverages in the minimum amounts as stated below. The coverages shall be maintained in full force and effect during the term of this Contract and shall not serve to limit any liabilities or any other Grantee obligations.

Name and Address of Insurance Agency:		Company Letter:	Companies Affording Coverage:		
		A			
		B			
Name and Address of Insured:		C			
		D			
LIMITS OF LIABILITY	MINIMUM - EACH OCCURRENCE	COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	DATE POLICY EXPIRES
Bodily Injury			Comprehensive General Liability Form		
Per Person			Premises Operations		
Each Occurrence			Contractual		
Property Damage			Independent Contractors		
OR			Products/Completed Operations Hazard		
Bodily Injury		Personal Injury			
and		Broad Form Property Damage			
Property Damage		Explosion & Collapse (If Applicable)			
Combined		Underground Hazard (If Applicable)			
Same as Above			Comprehensive Auto Liability Including Non-Owned (If Applicable)		
Necessary if underlying is not above minimum			Umbrella Liability		
Statutory Limits			Workmen's Compensation and Employer's Liability		
			Other		

State of Arizona and the Department named above are added as additional insureds as required by statute, Contract, purchase order, or otherwise requested. It is agreed that any insurance available to the named insured shall be primary of other sources that may be available.

It is further agreed that no policy shall expire, be canceled or materially changed to affect the coverage available to the state without thirty (30) days written notice to the State. This Certificate is not valid unless countersigned by an authorized representative of the insurance company.

Name and Address of Certificate Holder:

Date

Issued: _____

Authorized Representative

END OF SOLICITATION
PC-DSG-16-070116-00